## PART B - FEE(S) TRANSMITTAL

lete affected this form, together with applicable fee(s), to: Mail Stop ISSUE FEE MAR 1 2 2007

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

NSTRUCTIONS: THE propriete. All funder indical differences	form should be used for correspondence includired below or directed off tions.	or transmitting the ISSU ag the Patent, advance or herwise in Block 1, by (a	JE FEE and PUBLIC ders and notification a) specifying a new c	of m orresp	ON FEE (if requination of the contract of the	red). B vill be r and/or	nailed to the current (b) indicating a sepa	correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
24956 7590 12/18/2006 MATTINGLY, STANGER, MALUR & BRUNDIDGE, P.C. 1800 DIAGONAL ROAD SUITE 370					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
ALEXANDRIA, VA 22314								(Depositor's name)	
						(Signature)			
						(Date)			
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	ENTOR		ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
10/661,154 09/12/2003			Masataka Innan			IIP-5361 6807			
TILE OF INVENTION: STORAGE SYSTEM, AND METHOD FOR CONTROLLING THE SAME									
			·						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300		\$0		\$1700	03/19/2007	
EXAMINER ART UNIT		CLASS-SUBCLASS	S						
SORRELL, ERON J 2182			710-005000						
. Change of correspondence address or indication of "Fee Address" (37 :FR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of or agents OR, alte (2) the name of a registered attorney 2 registered paten	or printing on the patent front page, list the names of up to 3 registered patent attorneys gents OR, alternatively, the name of a single firm (having as a member a signered attorney or agent) and the names of up to gistered patent attorneys or agents. If no name is d, no name will be printed.					
ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print	or typ	e)				
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
HITACI	Tokyo, JAPAN								
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🙀 Corporation or other private group entity 🗀 Government									
a. The following fee(s)  XX Issue Fee  XPublication Fee (Notes of the Control of	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1417 (enclose an extra copy of this form).								
	itus (from status indicate								
	ns SMALL ENTITY state		• • • • • • • • • • • • • • • • • • • •				TITY status. See 37 Cl		
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fee (if req records of the United Sta	uired) will not be accepte ites Patent and Trademark	Office.	iian ti	ne appricant; a regi	sterea a	attorney or agent; or tr	e assignee or other party in	
Authorized Signature	4	<i>-</i>	·		Date <u>Ma</u>	arch 37 HMA	12, 2007 RZI2 0000003 10	661154	
Typed or printed nam			Registration N	<b>%</b> —	29,621	1400.00 OP '			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a **Beneficial Material State** public which is to file (and by **Materials** to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.